

# Work Order ID 110640

January-07-14 1:12:43 PM

**\*110640\***

Page 1

Item ID: 646.3011

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Stop

**\*NS2\***

Item Name: RH Half

Start Date: 1/07/14

Start Qty: 5.00

**\*5\***

Cust Item ID:

Required Date: 1/17/14

Req'd Qty: 5.00

**\*5\***

Customer:

Reference:

Approvals:

Process Plan: MLJ

Date: 14-01-07

Tooling:

Date:

Run Start

**\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop

**\*NR2\***

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

Draw Nbr

Revision Nbr

646.3000

N/C

100

0.00

**\*100\***

BAND SAW

Bandsaw

Memo

0.00

Jeaspa Bandsaw

Cut Blank at 9.700"

110

0.00

**\*110\***

HAAS CNC VERTICAL MACHINING #1

HAAS 1

Memo

0.00

HAAS CNC vertical machine #1

1-Machine per folio FB158

DWG REV: 11/c

FOLIO REV: 4A

2- deburr and break all sharp edges

DAS  
14  
9-89

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence  <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other  _____ _____ _____
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# Work Order ID 110640

January-07-14 1:12:43 PM

**\*110640\***

Page 2

Item ID: 646.3011

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Stop

**\*NS2\***

Item Name: RH Half

Start Date: 1/07/14

Start Qty: 5.00

**\*5\***

Cust Item ID:

Required Date: 1/17/14

Req'd Qty: 5.00

**\*5\***

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start

**\*NR1\***

Stop

**\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120	QC2- Inspect parts off machine FAI/FAIB	0.00							
<b>*120*</b>									<b>DAS</b>
QC	Memo	0.00							<b>14</b>
Quality Control									<b>9-89</b>
130	QC8- Inspect parts - second check	0.00							
<b>*130*</b>									
QC	Memo	0.00							
Quality Control									
131		0.00							
<b>*131*</b>									
HandFinish	Memo	0.00							
Hand Finishing	CLEAN AND REMOVE ALL PART MARKING								

N/A

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
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Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence  <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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# Work Order ID 110640

January-07-14 1:12:43 PM

\*110640\*

Page 3

Item ID: 646.3011 Accept \*N900040100\* Setup Start \*NS1\*  
 Revision ID: Stop \*NS2\*  
 Item Name: RH Half  
 Start Date: 1/07/14 Start Qty: 5.00 \*5\* Cust Item ID:  
 Required Date: 1/17/14 Req'd Qty: 5.00 \*5\* Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start \*NR1\*  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
140	Outsource process-Anodize per QSI017 4.1.10.1	0.00							
<b>*140*</b>									
Outsource4	Memo	0.00							
Outsource process - Anodize	Issue P/O to ATG : <u>23622</u>								
	1- Black Anodize as per Dwg 646.3000								
	2- PRIME AS PER DWG, SEE NOTE #2								
	Certification of Comformity is required								
150	Receive & Inspect for Damage & Mat'l Certs	0.00							
<b>*150*</b>									
Packaging	Memo	0.00							
Packaging									
155	QC5- Inspect part completeness to step on W/O	0.00							
<b>*155*</b>									
QC	Memo	0.00							
Quality Control									

CX 14/04/03 5

14/4/11 (S)

DAS  
27  
9-59  
14/4/11

S

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence
		<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

**Work Order ID 110640**

January-07-14 1:12:43 PM

**\*110640\***

Page 4

Item ID: 646.3011

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: RH Half

Start Date: 1/07/14 Start Qty: 5.00

**\*5\***

Cust Item ID:

Required Date: 1/17/14 Req'd Qty: 5.00

**\*5\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
180	Identify as per dwg & Stock Location: <u>4P</u>	0.00							
<b>*180*</b>									
Packaging	Memo	0.00							
Packaging	***IDENTIFY AS PER APICAL MPP-120 BY STAMPING P# AND REV***								
190	QC21- Final Inspection - Work Order Release	0.00							
<b>*190*</b>									
QC	Memo	0.00							
Quality Control									

3 SAD 14/04/1514-4-1414-04-16

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
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Doc/Data									
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Offset/Setup									
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### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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# Picklist Print

January-07-14 1:12:43 PM

Page 1

Work Order ID: 110640

Parent Item: 646.3011

Parent Item Name: RH Half

Start Date: 1/07/14

Required Date: 1/17/14

Start Qty: 5.00

Required Qty: 5.00

Comments: IPP REV:A NEW ISSUE 13/01/14 JFS VERIFY BY: JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M7075T6B6.000X0.250 7075-T6 BAR 6.000" X 0.250"		Purchased	No			100	f	14.0000	0.809	4.2578945			

Location

Loc Qty

Loc Code

MAT001

14

123611

2

M127736

12

M128502 x 4.3 on 14/03/26

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

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Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other  _____ _____ _____
--	--	---	---

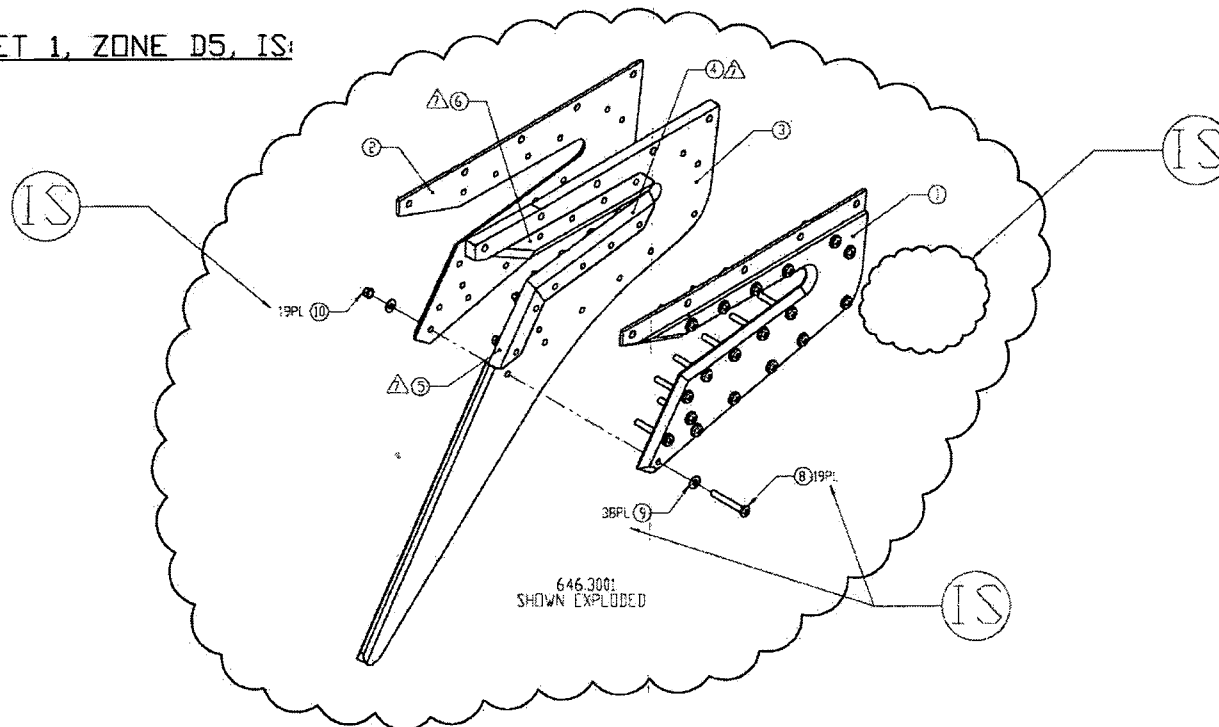


APICAL  
INDUSTRIES, INC.

ENGINEERING CHANGE NOTICE NO. 02195		SHEET 1 OF 4	
DWG NO. 646.3000	REV: N/C	PREPARED BY S. HUFF	DATE: 01/05/09
DWG TITLE: LOWER CUTTER ASSY		EFFECT ON DWG <input type="checkbox"/> INC. <input checked="" type="checkbox"/> UNINC.	
APPROVED BY: ENGR <i>[Signature]</i>	MFG <i>[Signature]</i>	QC <i>[Signature]</i>	EFF: NEXT ORDER
REASON: REMOVED RIVETS IN FAVOR OF ADDITIONAL SCREWS			

TRANSACTION CODES (TC)  
A-ADD C-CREATE  
R-REVISE D-DELETE

SHEET 1, ZONE D5, IS:

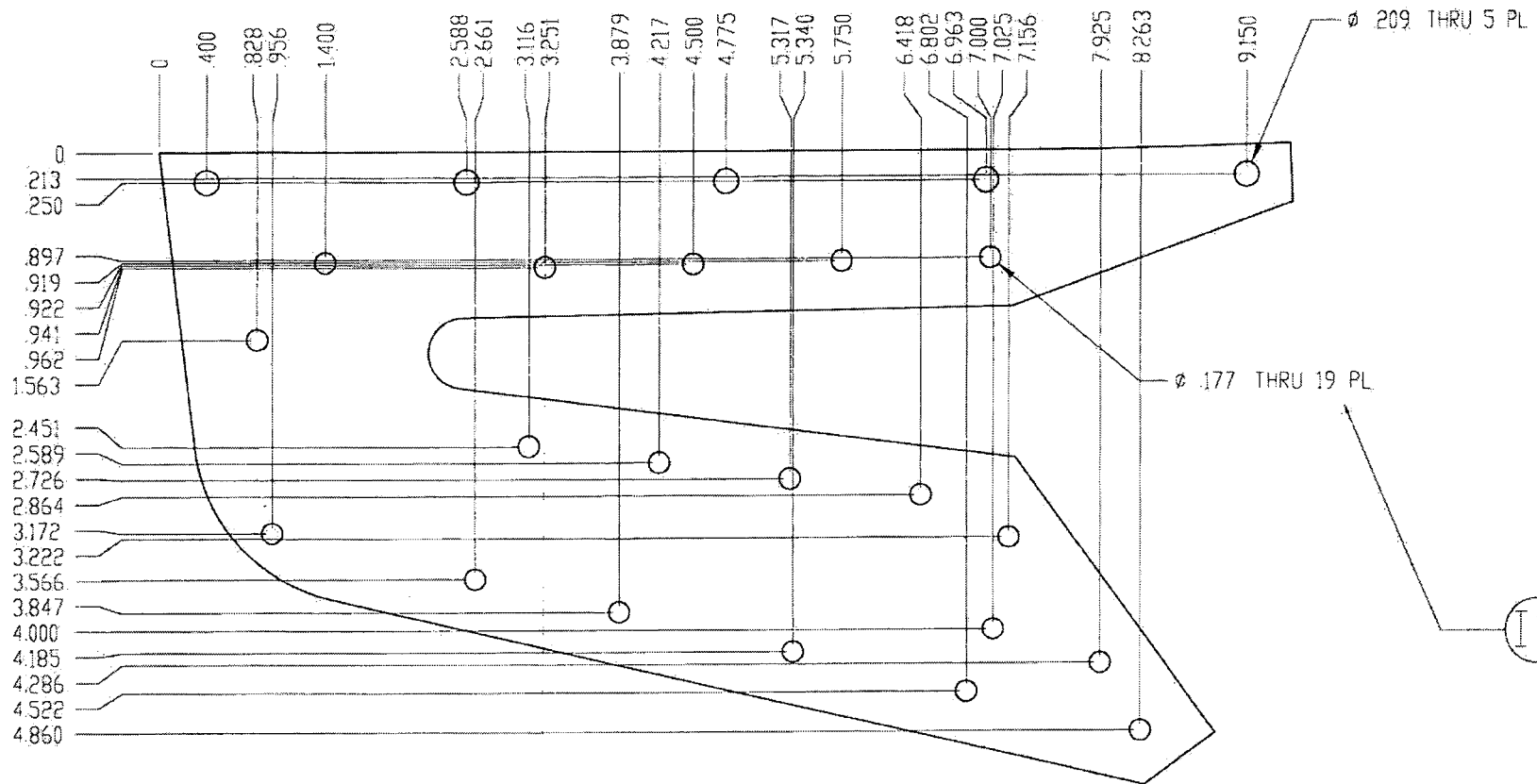


11 0640 MLS  
14-01-07

10	R	601.1541	19	LOCKNUT	MS21042L08
9	R	601.2764	38	WASHER	NAS1149FN832P
8	R	601.2765	19	SCREW	MS27039-0819
7	D	601.2766	2	RIVET	MS20470AD5-18
			3001		
F/N TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION	
DOCUMENTS EFFECTED:				CHANGE CATEGORY	DER REVIEW REQUIRED
				<input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO



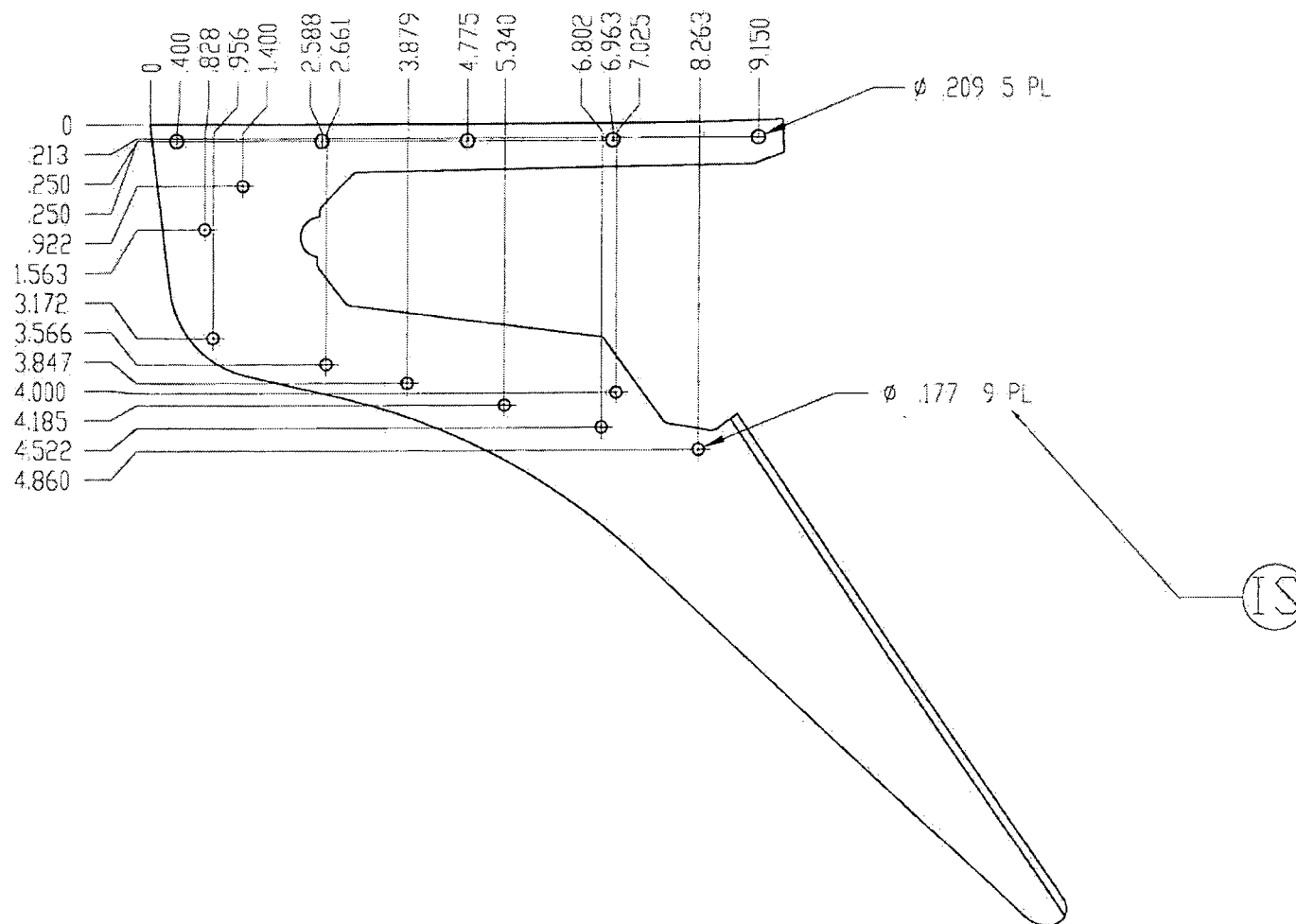
SHEET 3 IS:



SECTION A-A



F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION

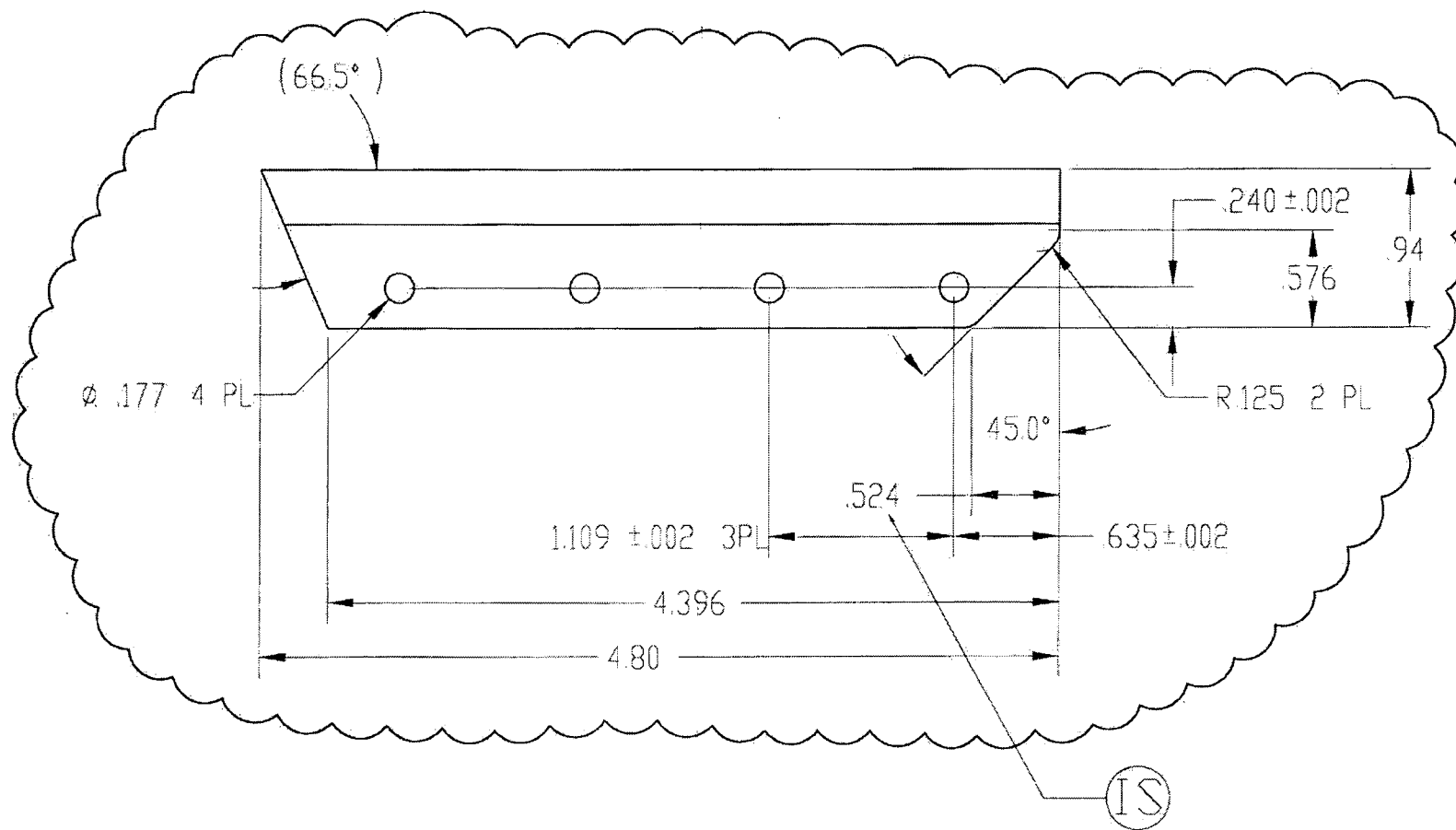
SHEET 5 IS:

SECTION F-F



F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION

SHEET 6, ZONE C4, IS:



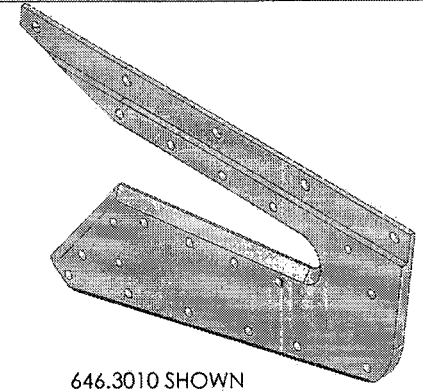
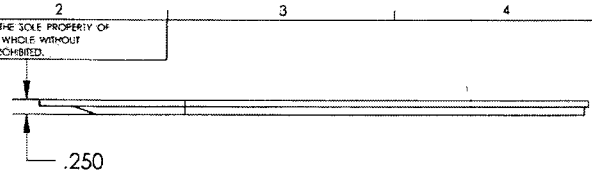
F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION



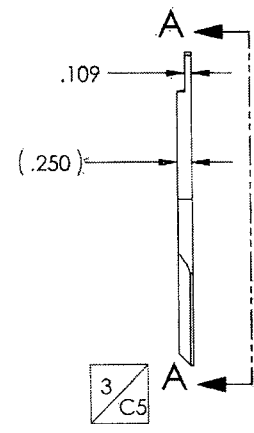
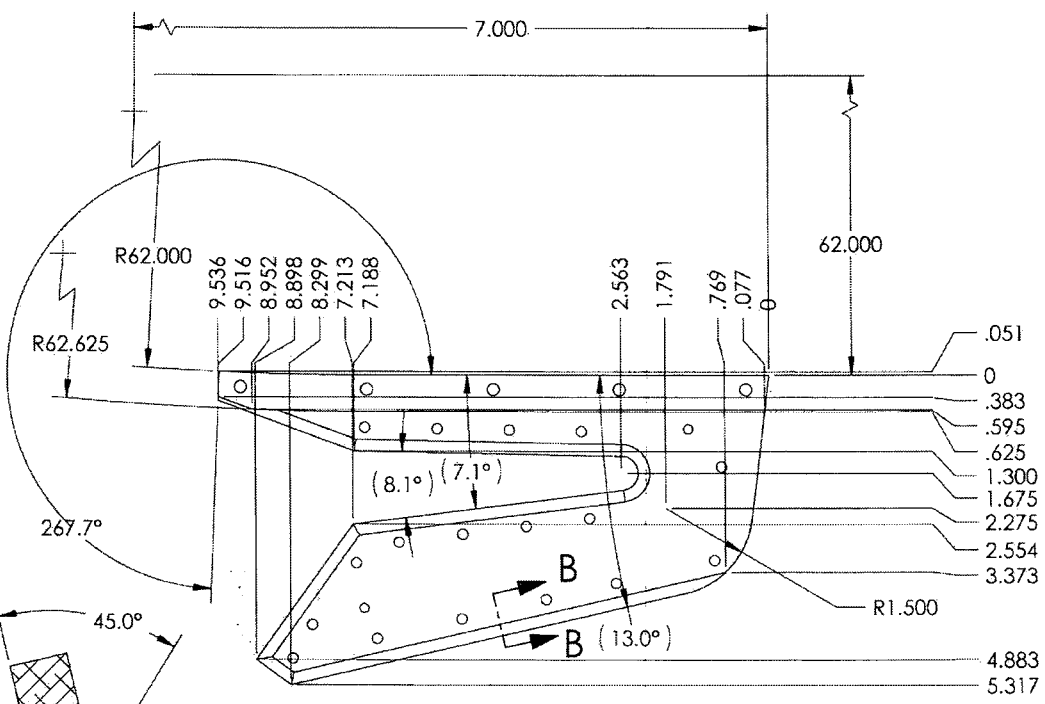
SER B	CAGE CODE 07M76	QWTS NO. 646.3000	REV N
SCALE NONE		SHEET 1 OF 1	



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646.3010 SHOWN  
646.3011 OPPOSITE

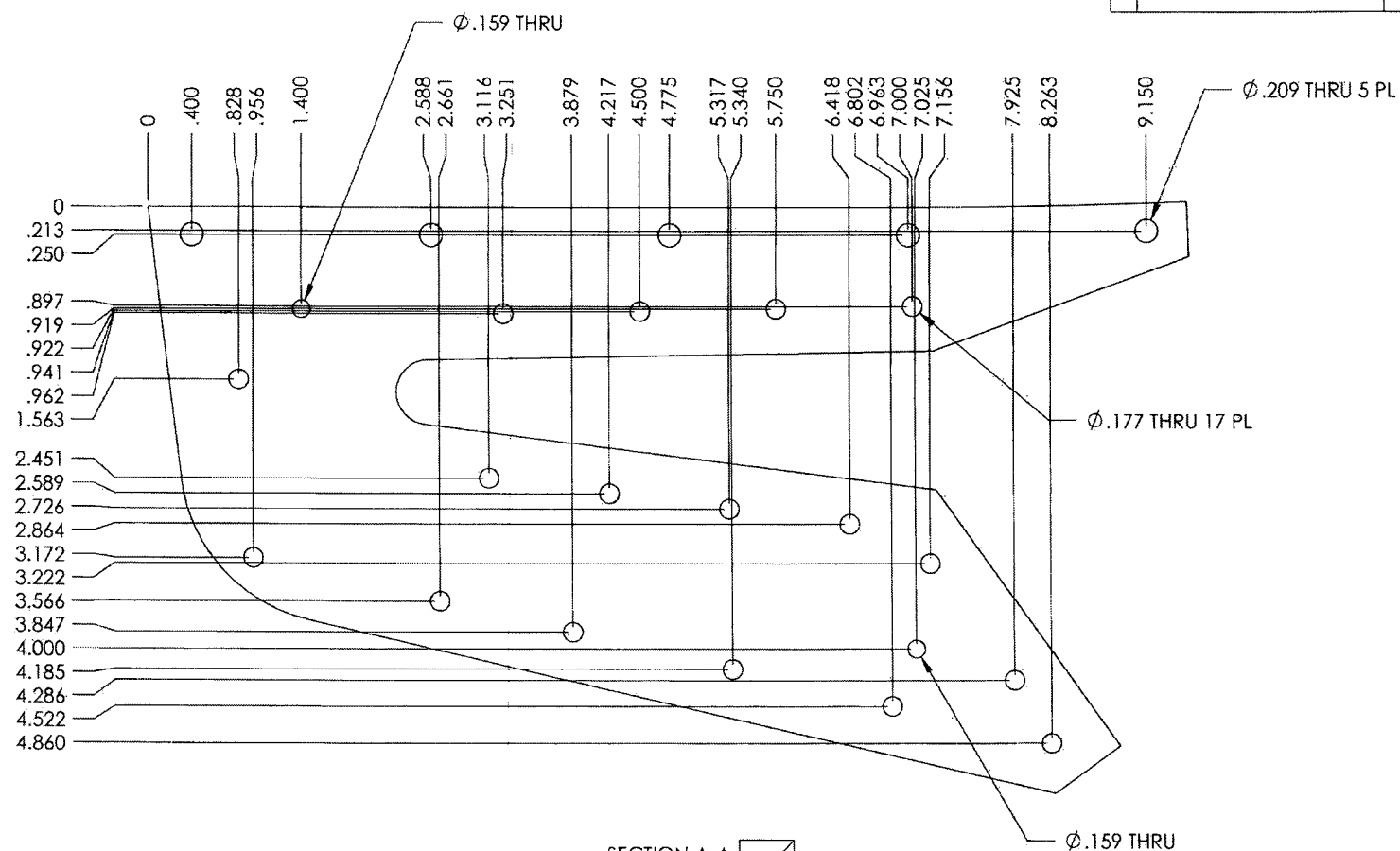



SECTION B-B  
TYP EDGE DETAIL

ORIGINAL DATE 11/01/04 12:00 PM		<b>APICAL INDUSTRIES</b> 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
DRAWN BY P. BRAYO	CHECKED S. JOSEPH	<b>LOWER CUTTER ASSY</b>	
DRAWING APPROVAL S. JOSEPH		SHEET B	REV. N/C
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 2 PLACE DECIMALS ±.01 3 PLACE DECIMALS ±.005 ANGLES ±.5°		DWG NO. <b>646.3000</b>	SCALE: NONE
		SHEET 2 OF 8	

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REVISIONS			
REV.	DESCRIPTION	DATE	APPROVE

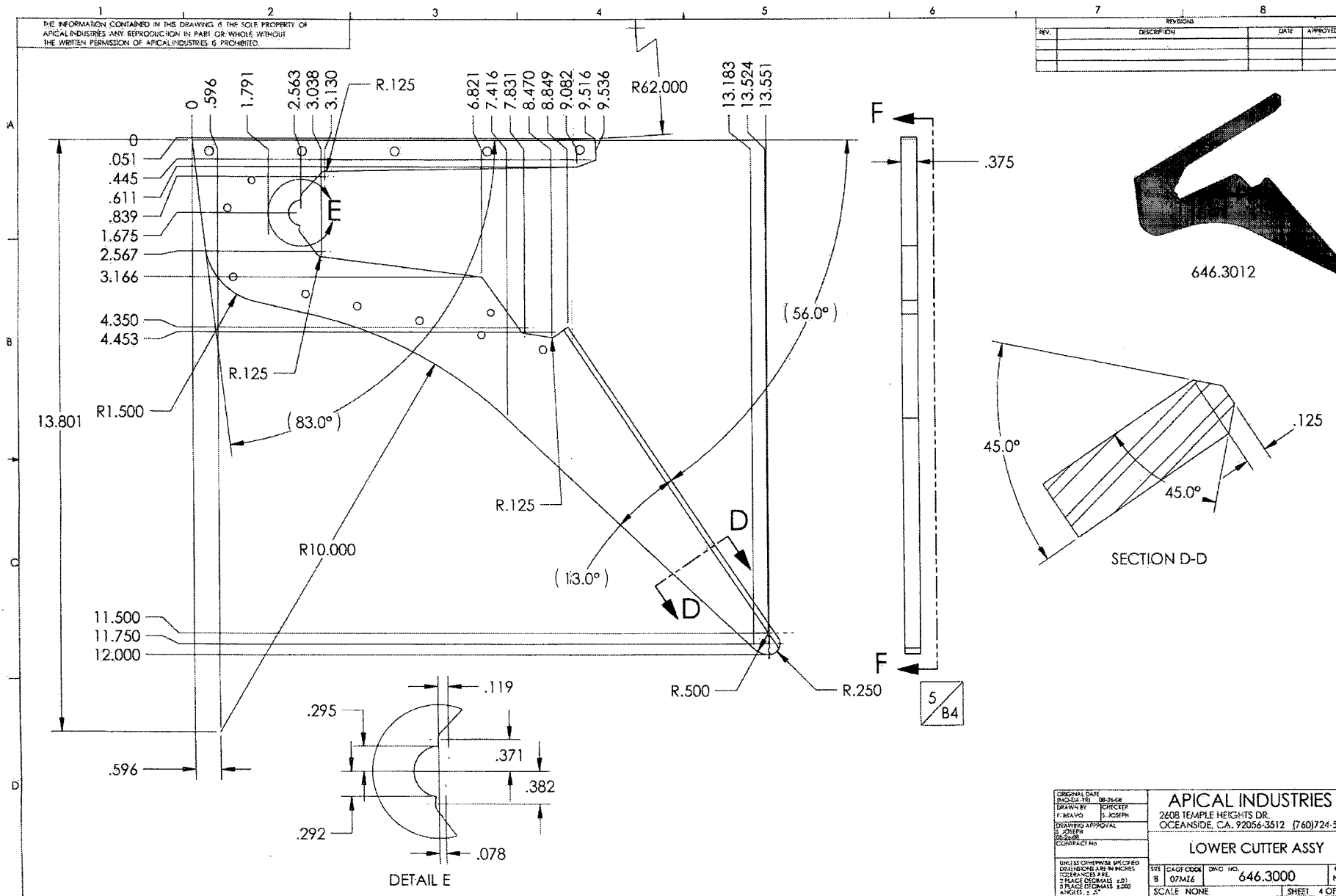


SECTION A-A 

ORIGINAL DATE (M/D/Y) 06-26-08 DRAWN BY P. BRAYO CHECKED BY J. JOHNSON CRAWLING APPROVAL T. JOSEPH 06/26/08 CONTRACT NO.	<b>APICAL INDUSTRIES</b> 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3312 (760)724-5300												
<b>LOWER CUTTER ASSY</b>													
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES 10 LANCES AND 4 2 PLACES TRENCH 201 3 PLACES DECMALS 2005 4 LANCES	<table border="1"><tr><th>ITEM</th><th>CAGE CODE</th><th>QTY.</th><th>REV</th></tr><tr><td>07/26/08</td><td></td><td>646.3000</td><td>N/C</td></tr><tr><td colspan="2">SCALE NONE</td><td>SHEET 3 OF 8</td><td></td></tr></table>	ITEM	CAGE CODE	QTY.	REV	07/26/08		646.3000	N/C	SCALE NONE		SHEET 3 OF 8	
ITEM	CAGE CODE	QTY.	REV										
07/26/08		646.3000	N/C										
SCALE NONE		SHEET 3 OF 8											

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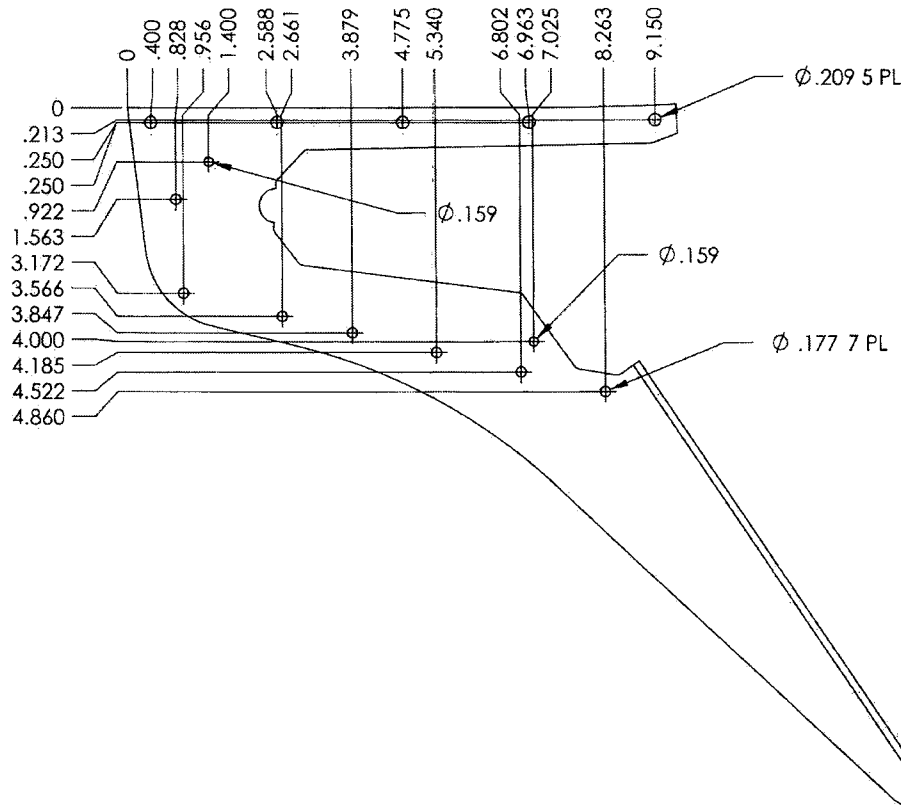
REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED



ORIGINAL DATE: 06-20-88 MODIFIED: 07-24-88 DRAWN BY: F. BRAVO CHECKED BY: S. JOSEPH DRAWING APPROVAL: S. JOSEPH DATE: 06-20-88 CUSTODY NO:		APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 1 PLACE DECIMALS ±.01 2 PLACE DECIMALS ±.005 ANGLES ±.5°		LOWER CUTTER ASSY	
REV.	DESCRIPTION	DATE	APPROVED
8	07/24/88	646.3000	N/C
SCALE: NONE		SHEET: 4 OF 8	

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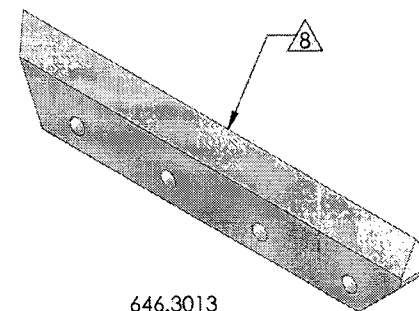
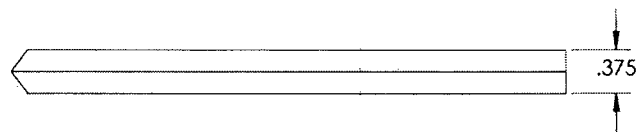
REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED



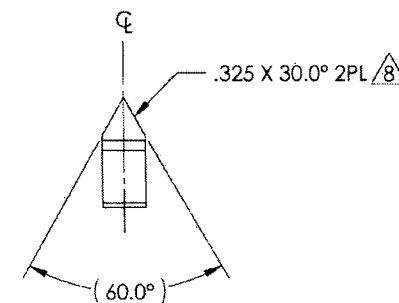
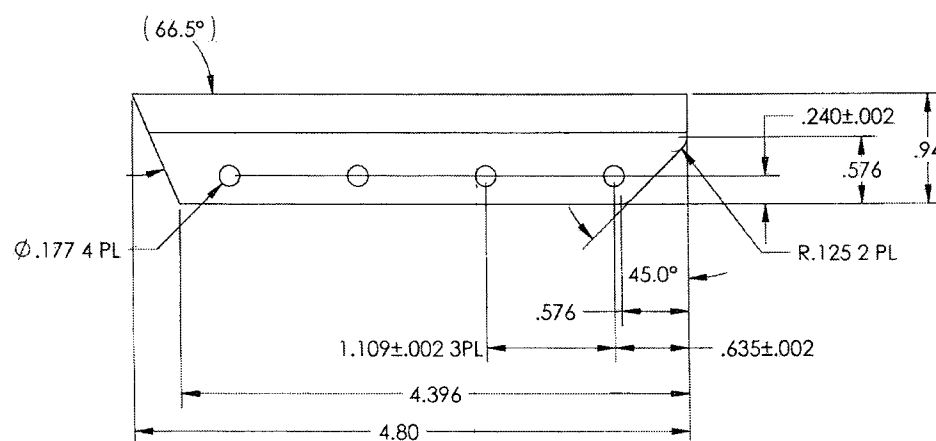
SECTION F-F 4/B6

ORIGINAL DATE: 14/01/2011 08:26:00 DRAWN BY: P. MAFIO CHECKED BY: J. JOSEPH DRAWING APPROVAL: J. JOSEPH CONTRACT NO.	<b>APICAL INDUSTRIES</b> 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300			
<b>LOWER CUTTER ASSY</b>				
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 3 PLACE DECIMALS ±.01 ANGLES ±.5°	SIZE B	CAGE CODE 07M15	DWG. NO <b>646.3000</b>	REV. N/C
SCALE NONE			SHEET 5 OF 8	

REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED



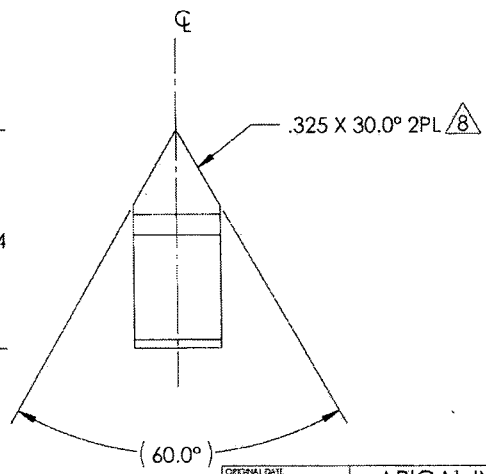
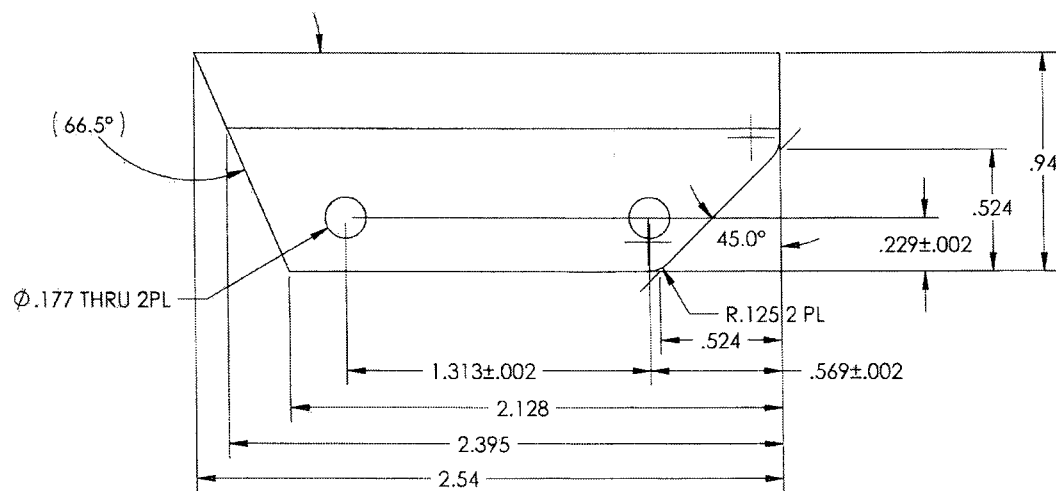
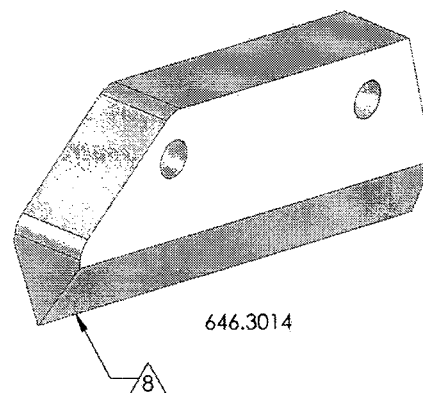
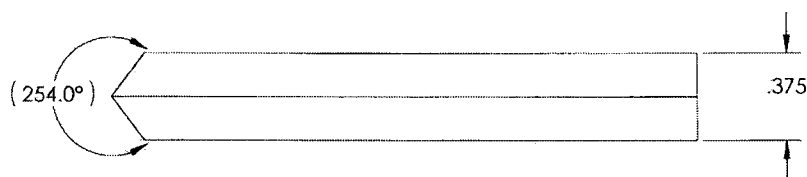
646.3013



EXPIRATION DATE (MM/DD-YY) 06-25-08 DRAWN BY J. KIDPH P. BRAND J. KIDPH DRAWINGS APPROVAL J. KIDPH 06-25-08 CONTRACT NO.	<b>APICAL INDUSTRIES</b> 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300			
<b>LOWER CUTTER ASSY</b>				
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 1/16" DIMS ± .005 1/8" DIMS ± .01 1/4" DIMS ± .015 3/8" DIMS ± .02 1/2" DIMS ± .03	MFG SCALE	CAGI CODE 07A16E	DIVD. NO 646.3000	REV. N/C
3 NAME NONE		SHEET 6 OF 8		

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REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED



ORIGINAL DATE  
(MM-DD-YY) 05/26/08  
DRAWN BY J. JACOB  
P. BRAVO  
DRAWING APPROVAL  
J. JACOB  
CONTRACT NO.

**APICAL INDUSTRIES**  
2608 TEMPLE HEIGHTS DR.  
OCEANSIDE, CA. 92056-3512 (760)724-5300

UNLESS OTHERWISE SPECIFIED  
DIMENSIONS ARE IN INCHES  
TOLERANCES ARE:  
7 PLACE DECIMALS ±.01  
3 PLACE DECIMALS ±.005  
ANGLES ±.5°

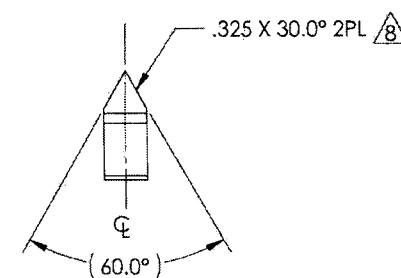
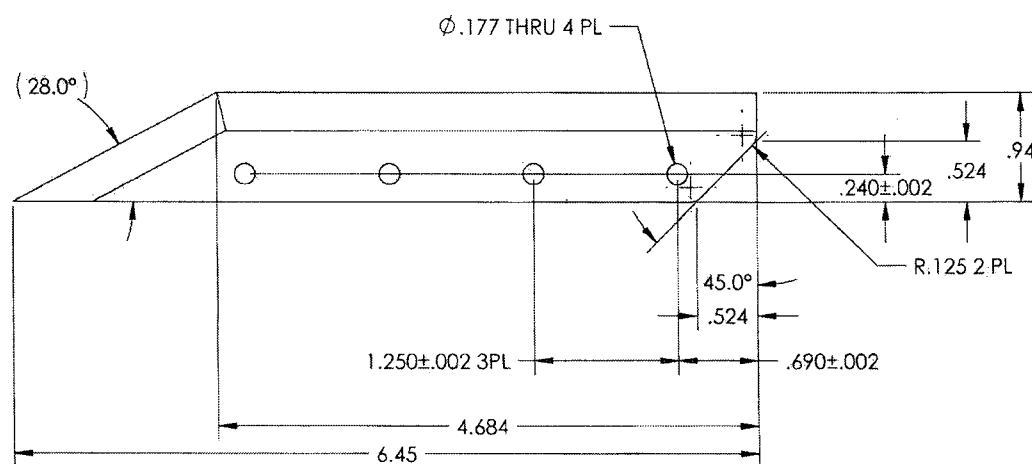
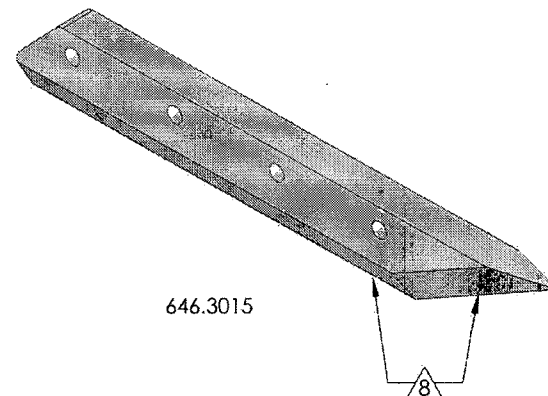
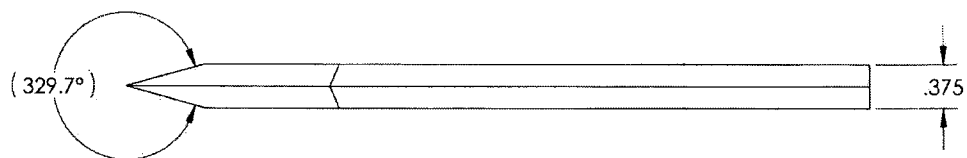
**LOWER CUTTER ASSY**

SIZE	CAGE CODE	DWG. NO.	REV.
B	074426	646.3000	N/C
SCALE NONE			SHEET 7 OF 8



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REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED



ORIGINAL DATE MODIFIED BY: 08-24-08		APICAL INDUSTRIES	
DRAWN BY: CHICHER		2608 TEMPLE HEIGHTS DR.	
P. BRAVO S. KIRSH		OCEANSIDE, CA. 92056-3512 (760)724-5300	
DRAWING APPROVAL		LOWER CUTTER ASSY	
S. JORDY		SCALE: NONE	
REVISION		SHEET 8 OF 8	
CONTRACT NO.		REV. NYC	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 3 PLACE DECIMALS ±.01 2 PLACE DECIMALS ±.02 ANGLES ±.5°		SIZE: 11x17 CAGE CODE: 07M26 DWG. NO.: 646.3000	



Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID PO23622

Purchase Order Date 4/3/2014

PO Print Date 4/11/2014

Page Number 2 of 4

**Order From :**

A.T.G. INDUSTRIES INC.  
731 INDUSTRIELLE ROAD  
ROCKLAND, ON K4K 1T2  
CANADA

VC-ATG001

**Ship To :** DART AEROSPACE LTD  
1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

**Contact Name**

**Vendor Phone** 613-446-4544

**Ship To Contact**

**Ship To Phone**

**Ship Via:** VENDOR'S TRUCK

**Ship Acct:**

**Buyer**

Chantal Lavoie

**Customer POID**

**Customer Tax #** 10127-2607

**Terms**

Net 30

**Currency**

CAD

**FOB**

FCA - (Free Carrier)

3	113799	646.3011 RH HALF	4/18/2014	8.00	\$10.25	\$82.00
			Yes			
			4/18/2014			

FINISH: HARD BLACK ANODIZE AS PER IAW MIL-A-8625 TYPE III, CLASS 2 / PRIME AS PER IAW MIL-P-23377J TYPE 1 CLASS N

**Line Total:** \$82.00

4	110640	646.3011 RH HALF	4/18/2014	5.00	\$10.25	\$51.25
			Yes			
			4/18/2014			

FINISH: HARD BLACK ANODIZE AS PER IAW MIL-A-8625 TYPE III, CLASS 2 / PRIME AS PER IAW MIL-P-23377J TYPE 1 CLASS N

**Line Total:** \$51.25

5	113655	646.3012 LOWER GUIDE	4/18/2014	8.00	\$19.90	\$159.20
			Yes			
			4/18/2014			

FINISH: HARD BLACK ANODIZE AS PER IAW MIL-A-8625 TYPE III, CLASS 2 / PRIME AS PER IAW MIL-P-23377J TYPE 1 CLASS N

**Line Total:** \$159.20

**Note:**

4/11/2014



A.T.G. Industries Inc.  
731, rue Industrielle Rd.  
PLATING DEPARTMENT  
Rockland, On K4K 1T2  
Canada  
Ph: (613) 446-4544  
Fax: (613) 446-4556

### Pack List

Number: 62979

Date: 11-Apr-14

#### To

DART AEROSPACE LTD  
1270 ABERDEEN ST.  
HAWKESBURY, ON K6A 1K7  
Canada

#### Ship To

DART AEROSPACE LTD  
1270 ABERDEEN ST.  
HAWKESBURY, ON K6A 1K7  
Canada

Ph: 613-632-5200

Fax: 613-632-1185

Ph: 613-632-5200

Fax: 613-632-1185

Terms	Ship Via

Quantity	Description	Rev:
1 lot	Part: ASST  13 PCS 646.3011 (10.25) <i>578</i> 14 PCS 646.3012 (19.90) 6 PCS 647.1915 (10.50)  HARD ANODIZE BLACK MIL-A-8625 TYPE III CLASS 2  PRIME MIL-P-23377J TYPE I CLASS N  PRICE IS PER PIECE Job: 20140215	        Line:

#### Certificate of Conformance

A.T.G. Industries certifies that all items in this shipment are in conformance with all requirements, specifications and drawings referenced in the purchase order.

ISO 9001 : 2008 REGISTERED  
ATG SALES-2010 TERMS APPLY

DATE: *11/4/14*

CERTIFIED SIGNATURE: *[Signature]*

RECEIVER SIGNATURE: \_\_\_\_\_

